

M
11-7-00

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|------------|
| FEE DETERMINATION | lw | 685044 | 10/6/02 |
| O.I.P.E. CLASSIFIER | | 21 | 10/1/7102 |
| FORMALITY REVIEW | AF | 524 | 11/1/87/00 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
|-------|----------|
| 1 | Final |
| 1 | Original |
| 1 | 7/2/02 |
| 2 | ✓ |
| 3 | ✓ |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here